Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN	
To	OTAL CLAIMS				COGG					OR 7	SMALL	
			20			 .		RATE	FEE	┨.	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			2 0 minus 20=		• 0			X\$ 9=	0.	OR	X\$18=	
INDEPENDENT CLAIMS			<u> </u>	inus 3 ≐	*	0		X43=	. 0	OR	X86=	
ML	JLTIPLE DEPLI	NDENT CLAIM P	RESENT					+145=	0	OR	+290=	
* If	the difference	in column 1 is	ess than zero, enter "0" in column 2				<u>'</u>	TOTAL	384	OR	TOTAL	
CLAIMS AS AMENDED - PART II								OTHER THAN				
	·	(Column 1)	(Column 2)			(Column 3)	S	MALL E	NTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	BER USLY	PRESENT EXTRA	ļ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* ENTATION OF MI	Minus	***	CL AIM	-	[;	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								145=		OR	+290=	
								TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE	
		AUL)(1. FEE L		,	ADDII. FEE						
8		(Column 1) CLAIMS REMAINING		(Colum HIGHE NUMB	ST	(Column 3)			ADDI-	ſ		ADDI-
AMENDMENT B		AFTER AMENDMENT		PREVIOU PAID F	USLY	PRESENT EXTRA	F	RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		= .	×	(\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		= ,	 	43 =	·	OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT (CLAIM		-					
								145=		OR	+290=	•
		ADD	TOTAL OIT. FEE	·	OR ,	TOTAL ADDIT. FEE						
			•	•	:	•	·					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA	R		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X	\$ 9=		OR	X\$18=	
	Independent		Minus	drift .		=	x	43=	1		X86=	: -
	FIRST PRESE		-		OR	7.00-						
• #	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
→ H	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE	
1	he *Highest Num	ber Previously Paid	For (Total or	Independen	ress man it) is the h	ું. enter ેડ. nighest number	found in	n the appr	opriate box	in colu	mn 1.	